## **CLAIMS ONLY**

SERIAL NO. FILING DATE

APPLICANT(S)

|               |  | FILED          |             | ER   | AFTER  |  |
|---------------|--|----------------|-------------|--|--|--|
|               |  |                |             | NDMENT   | 2nd AME  |  |
|               | IND.   | DEP.           | IND.        | DEP.   | IND.   | DEP.   |
|               |  | <b></b>        |             |  |  |  |
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| 3             |  | 1              |             |  |  |  |
| 4             |  | 1              |             |  |  |  |
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| 9             |  |                |             |  |  |  |
| 10            |  | 1;             |             |  |  |  |
| 11            |  |                |             |  |  |  |
| 12            |  | 1              |             |  |  | 1  |
| 13            |  | 1              |             |  | <del></del>                                      | <del> </del>                                     |
| 14            | 1  |                |             |  | <del></del>                                      | <del>                                     </del> |
| 15            | 1  | <del> </del>   | <del></del> |  |  |  |
| 16            | <u>.1</u>  |                | -           |  | -  |  |
| 17            | μ  | $\vdash$       | <del></del> |  |  | <del>                                     </del> |
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| 43            | <u> </u>   |                |             |  | <b></b>  | 1  |
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| 49            |  |                |             |  |  |  |
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| TOTAL         | 11   |                |             |  |  | -  |
| IND.<br>TOTAL | 14   | J <b>♣</b>     | <del></del> |  | <del> </del>                                     |  |
| DEP.          | 12   |                |             |  |  |  |
| TOTAL         | 16   | 34,000         | i           | 1  |  | 5276.5   |

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| -               | IND.            | DEP.           | IND.   | DEP.         | IND.        | DEP.           |  |
| 51              | 1               |                |  |              |             |                |  |
| 52              | 1               | -              |  |              |             |                |  |
| 53              | Ì               |                | _  | <del>-</del> |             |                |  |
| 54              | 1               |                | -  |              | -           |                |  |
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| 58              | 1               |                |  |              |             |                |  |
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| 63              |                 |                |  |              |             |                |  |
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| 71              |                 |                |  |              |             |                |  |
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| 74              |                 |                |  |              |             |                |  |
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| 76              |                 |                |  |              |             |                |  |
| 77              |                 |                |  |              |             |                |  |
| 78              |                 |                | <u></u>  |              |             |                |  |
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| 80              |                 |                |  |              |             |                |  |
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| 82              |                 |                |  |              |             |                |  |
| 83              |                 |                |  |              |             |                |  |
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| 95              | +               | -              | <del>                                     </del> | <del> </del> | <del></del> | <b> </b>       |  |
| 96              | +               | -              | -  | <u> </u>     | <u> </u>    |                |  |
| 98              | <del> </del>    | <del> </del>   | <del> </del>                                     |              | <u> </u>    | <del> </del>   |  |
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| 100             | 1               |                | <b> </b> -                                       | ļ            |             | ļ              |  |
| TOTAL           | <del> </del>    | <del> </del>   | <del> </del>                                     |              | <u> </u>    | <del> </del> - |  |
| IND.            | ļ               | ]              | <u> </u>   | <b>.</b>     |             |                |  |
| TOTAL<br>DEP.   | L               |                | <u> </u>   |              |             | _              |  |
| TOTAL<br>CLAIMS |                 |                |  | 110          |             |                |  |
|                 |                 |                |  |              |             |                |  |

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-2022 (1-98)

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